PETITIO	N FOR EXTENSION	ON OF TIME	UNDER 37 CFI	R 1.136(a)		ocket Number (Optional) 407T-894610US
	31PE	łn re Ar	pplication of Sus	san Fisher, et	al.	
	23/		ation Number: 09			nuary 16,1998
MA S	R 1 4 2002		TERED PROTE	IN EXPRESS		
(A)	HA SEE		Art Unit 1656	Examiner	S. Houtte	man
This is a reidentified a	equest under the proapplication. sted extension and					BY SOP PASETS above GINALLY FILED
	e period desired):		•		10	RECEIV
	One month (37 CF	1		\$ 11		MAR 2 0 20
X	Two months (37 Cl			\$ 40		•
	Three months (37.0		•	\$ 92 \$144		TECH CENTER 16
	Four months (37 C			\$144		
X	Five months (37 Cl			\$196		unt shown above is redu
X X I am the	A check in the amo	dy been filed in bunt of the fee has already but is hereby autheposit Accountee of record of the posit of record of the por agent under the por agent under the position of the position	een authorized to norized to charge Number <u>50-0893</u> the entire interest	any fees that m 3. I have enclo	nay be requ	ation to a Deposit Accountried, or credit any licate copy of this sheet.
<u>M</u>	larch 4, 2002 Date				Hunter, C	38,498 name and Reg. No.
<u> </u>			CERTIFICATE OF		- D4-10	in a 6 m land along a 71 to 2
envelope	addressed to: Assist	•				vice as first class mail in a ate: March 4, 2002
Typed or Printed N		Appling	<u> </u>			T
1						

01 FC:217

Signature

Date

03/04/02

AL AMOUNT OF PAYMENT

(\$)

Complete if Known 09/101,283 January 16,1998 Susan Fisher **Examiner Name** S. Houtteman 1656 Group / Art Unit 407T-894610US Attorney Docket No.

TRADEMA

MAR 1 4 2002

/ METHOD OF PAYMENT (check one) FEE CALCULATION (continued)				
	3. ADDITIONAL FEES			
1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	Large Entity Small Entity			
Deposit	Fee Fee Fee Fee Fee Description	Fee Pald		
Account Sumber 50-0893	105 130 205 65 Surcharge - late filing fee or oath			
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.			
X Charge Any Additional	139 130 139 130 Non-English specification			
Fee Required Under 37 CFR 1.16 and 1.17	147 2,520 147 2,520 For filling a request for reexamination			
	_ 112 920* 112 920* Requesting publication of SIR prior to Examiner action			
2. Payment Enclosed: Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
	115 110 215 55 Extension for reply within first month			
FEE CALCULATION	116 400 216 200 Extension for reply within second month			
1. BASIC FILING FEE	117 920 217 460 Extension for reply within third month	460.00		
Large Entity Small Entity Fee Fee Fee Fee Description	118 1440 218 720 Extension for reply within fourth month			
Code (\$) Code (\$) Fee Paid	128 1960 228 980 Extension for reply within fifth month			
101 740 201 370 Utility filing fee	119 320 219 160 Notice of Appeal			
106 310 206 155 Design filling fee	120 300 220 150 Filing a brief in support of an appeal			
107 480 207 240 Plant filing fee	121 260 221 130 Request for oral hearing			
108 690 208 345 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	,		
114 150 214 80 Provisional filing fee	Dethies to service considering			
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unavoidable 141 1280 241 640 Petition to revive - unintentional			
2. EXTRA CLAIM FEES	142 1280 242 640 Utility issue fee (or reissue)			
Fee from	142 420 042 04F Design Serie for			
Extra Claims below Fee Paid	144 580 244 290 Plant issue fee			
independent 200	122 130 122 130 Petitions to the Commissioner			
Claims Multiple Dependent	123 50 123 50 Petitions related to provisional applications			
**or number previously paid, if greater; For Reissues, see below	126 180 126 180 Submission of Information Disclosure Stmt			
Large Entity Small Entity	ER1 40 581 40			
Fee Fee Fee Fee Description Code (\$) Code (\$)	property (times number of properties)			
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection (37 CFR 1.129(a))			
102 84 202 42 Independent claims in excess of 3 104 280 204 140 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be			
109 78 209 39 ** Reissue independent claims	examined (37 CFR 1.129(b))			
over original patent	Other fee (specify)			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)			
SUBTOTAL (2) (\$)	· Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	460.00		

SUBMITTED B	Υ	Complete (if	Complete (if applicable)		
Typed or Printed Name	7 Tom Hunter	Reg. Number	38,498		
Signature	Tom Han Date 03/04/02	Deposit Account User ID			

CERTIFI	CATE	OF I	VAIL I	NO

The selection of the se	<i>c.</i>
I hereby certify that this correspondence is being deposited with the United States Postal Service as	
envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on this date:	March 4, 2002

Typed or Printed Name	Chiani Appling		
Signature	() Up	Date	03/04/02